authorities for prevention, rehabilitation, legislation and law enforcement to tackle this problem at the Central and State levels. It is also not clear what kind of input these reports are based on. There does not appear to have been an objective and informed assessment in consultation with concerned national/governmental agencies in arriving at conclusions that have been published in this internal report. This aspect has been taken up with the US Government appropriately.

Availability of aganwadi food

886. MS. MABEL REBELLO: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether it is a fact that only 67 per cent of children get anganwadi food and if so, by when all the children of the country will get supplementary diet;

(b) whether Government are aware that the poorest of the poor are deprived of anganwadi food due to inaccessible area, migrant labour etc.;

(c) if so, how Government would ensure food for these most neglected sections; and

(d) in what manner, government would universalize the anganwadi supplement food for all the children, at least for the BPL families, children?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI RENUKA CHOWDHURY): (a) The Integrated Child Development Services (ICDS) Scheme provides all the six services including supplementary nutrition to children who come to Anganwadi Centres (AWCs). As reported by the States, 54.07 % children (6 months—6 years) received supplementary nutrition (as on 31.3.2007). Further, it is the mandate of the Government, as enunciated in its National Common Minimum Program (NCMP), to universalize the ICDS Scheme to provide a functional Anganwadi in every settlement and ensure full coverage of all children, below 6 years of age.

(b) to (d) With a view to achieve an inclusive universalisation of ICDS and to reach the most vulnerable and disadvantaged beneficiaries, the States have been addressed to furnish their requirements for additional Projects/AWCs and Mini-AWCs for the 3rd Phase of expansion of the Scheme. In doing so they have also been requested to identify SC and ST hamlets/habitations for setting up AWCs and also to ensure that no habitation/settlement with predominantly SC/ST/Minority population, is left out.

Nutrition programme of aganwadis in Jharkhand

887. MS. MABEL REBELLO: Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether Government are aware that the nutrition programme of anganwadis is poorly managed in Jharkhand;

(b) whether a lot of children, who are eligible for nutritional food, are deprived of such food because of the mismanagement by the lower functionaries;

(c) whether the tribal children, who are already poor and malnourished, are deprived of the supplementary food meant for them; and

(d) if so, the proposals to rectify the situation and how Government propose to use the services of MPs and MLAs to improve this programme?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI RENUKA CHOWDHURY): (a) and (b) As reported by the State Government, every beneficiary irrespective of the economic status, who comes to the Anganwadi Centre is provided supplementary nutrition as per fixed norms.

(c) Supplementary nutrition is provided to all children including the tribal children coming to the Anganwadi Centre.

(d) The details of involving public representatives in the implementation of the programme are being worked out and will be included in the revamped scheme.

Issue of female foeticide

888. SHRI RAVULA CHANDRA SEKAR REDDY:
PROF. RAM DEO BHANDARY:

Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether it is a fact that female foeticide remains the gravest of all the issues concerning women and education of girl child and it is constantly increasing in the States;

(b) if so, the details thereof, State-wise and the reasons therefor; and

(c) the steps Government are taking to prevent such incidents in future?

THE MINISTER OF STATE OF THE MINISTRY OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI RENUKA CHOWDHURY): (a) and (b) As per Registrar General of India Census figures, the child sex ratio (0—6 years) has declined trom 945 girls per 1000 males in 1991 to 927 girls per 1000 males in 2001. The State-wise details are available on '*www.censusindia.net*'. Surveys indicate that female foeticide generally takes place due to son preference, high rates of dowry and a patriarchal society.

(c) Ministry of Health and Family Welfare is in the process of carrying out amendments to the Pre-Conception and Pre-natal Diagnostic Technique Act 1994 for stringent implementation of the Act. The States have been provided funds for implementation activities under Reproductive and Child Health Programme-II. It is also proposed to conduct auditing of all ultrasound clincics in the country. The National Support and Monitoring Cell (NSMC) formed for intensifying the implementation of the Act in the country has been strengthened with posting of a Leader in addition to a Social Scientist.